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PTO/SB/21 (02-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/773,608	
	Filing Date	February 6, 2004	
	First Named Inventor	FISHER, MICHAEL G.	
	Art Unit	3732	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	5	Attorney Docket Number	021976-000200US

**ENCLOSURES (Check all that apply)**

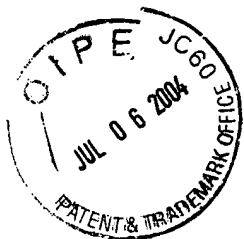
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Correction of Filing Receipt; Supplemental ADS; Copy of previously filed Declaration; and Return Postcard
<b>Remarks</b> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Townsend and Townsend and Crew LLP	Reg. No. 48,268
Signature		
Date	July 1, 2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Monique M. Butler		
Signature		Date	July 1, 2004



PATENT  
Attorney Docket No.: 021976-000200US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Michael G. Fisher et al.

Application No.: 10/773,608

Filed: February 6, 2004

For: DYNAMIC KNEE BALANCER

Examiner: Unassigned

Art Unit: 3732

REQUEST FOR CORRECTED FILING  
RECEIPT

Office of Initial Patent Examination  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached is a copy of the official Filing Receipt received from the Patent and Trademark Office in the above-noted application for which issuance of a corrected filing receipt is respectfully requested.

There is an error in that inventor Toshi Katsuya's name should read as follows:

Toshinobu Katsuya

The correction is due to applicant's error and the fee therefore, pursuant to 37 CFR §1.19(h), of \$25.00 is to be charged to Deposit Account No. 20-1430. Please charge any additional fees or credit overpayment to the Deposit Account No. 20-1430. This Petition is submitted in triplicate.

Respectfully submitted,

Scott M. Smith, M.D.

Reg. No. 48,268

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## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/773,608	02/06/2004	3732	1231	021976-000200US	11	114	3

20350

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CONFIRMATION NO. 7771

## FILING RECEIPT



\*OC000000012565792\*

Date Mailed: 05/07/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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~~Toshi~~ Katsuya, Kobe, JAPAN;  
 Toshinobu

## Assignment For Published Patent Application

Synvasive Technology, Inc., El Dorado Hills, CA;

## Domestic Priority data as claimed by applicant

## Foreign Applications

If Required, Foreign Filing License Granted: 05/07/2004

Projected Publication Date: 08/11/2005

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

**Title**

Dynamic knee balancer

**Preliminary Class**

606

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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